

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

2007 JA 17 AM 11: 40

(CFA-4) **Summary Sheet**

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

TOTAL PAGES IN ENTIRE CFA-4 REPORT

CLERK, HAMBLYON COUNTY COURS 3 IS THIS AN AMENDMENT? Yes COMMITTEE INFORMATION

1. Full Name of Committee (as on Statement of Organization)			
FRIENDS FOR MARINA S. KING			
Acronym or Abbreviated Name (if any)	3. Committee Telephone Number (765)552-0301		0.1
Mailing Address (address where all campaign finance correspondence is received)	eck if this is a n		
27899 ST. KD 213			
5. City, State, ZIP Code ARCADIA, IN 46030 6. Party Affiliation (if applicable) REPUBLICAN			
CANDIDATE INFORMATION (For Candidate's Co	mmittees Or	nly)	
7. Full Name of Candidate (include any nickname)		tion or If Independen	
MARINA SUE KING	REPUBLICAN		
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of		
WHITE KIVER TOWNSHIP TRUSTEE	M	MILTON	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement of C	Organization)	Post-Con	vention
12. Reporting Period:	100	COLUMN A	COLUMN B
From: 4/08/06 Through: 12/31/06		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	3.40	95.06	
14. Cash on hand and investments January 1, current year.			
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	100		21000
15a. Itemized (use Schedule A)	ď	260.00	360.00
15b. Unitemized		0	0
15c. Add lines 15a and 15b in both columns SUBTOTAL		60.00	360.00
	OTAL 3	55.06	360.00
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)	5550		
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		281.00	281.00
17b. Uniternized		44.00	44.00
17c. Add lines 17a and 17b in both columns SUBT	OTAL	325.N	325.00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	30.06	30.06
19. Debts OWED BY the committee (use Schedule D)		0	
20. Debts OWED TO the committee (use Schedule E)		0	

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE

Signature on File

AM II:

files a fraudulent report commits a Class D felony. (IC 3-14-1-13)-A person who fails to file a complete or accurate report as required by the indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
NARCOURT INDUSTRIES 7765 SK75 NO YHSL	a a	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	162.00	162.00	5-8-06
CODE A PRINTING 1800 E. 96 HST. PISHERS. IN	1	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	119.00	119.00	4-16-06
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PA	GE OF SCHEDULE B	\$ 281.00		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH	E LAST PAGE ONLY	0 201 - 3		



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(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

PRINTIPLE PLACE IN THE SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebetes, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
(street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	YEAR-TO-DATE	RECEIVED BY
J. BRADLEY KING	Contributions:			
ULS E. JOHL ST.	In-Kind (describe)			4-14-06
1 ND 1 A NAPO LIS, IN	Other Receipts:	160.00	160.00	
Contributor's Occupation (If required) AITO ENEY	Misc. (specify)		21	
MALINA S. KING	Contributions:	- 4		- V-N/
12915 E. 28/01 ST.	In-Kind (describe)		200.00	2-15-06
ATLANTA, IN 46031	Other Receipts:	100.00	200.00	3 // 0
Contributor's Occupation (# required) APPRALS ER	Misc. (specify)			
3.	Contributions:			
	Direct In-Kind (describe)	-		
	Other Receipts:			
	Misc. (specify)	12		
Contributor's Occupation (If required)				
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts:	-		
	Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 260.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on IT)	A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$ 240.00		

26000